EXHIBIT 15 (Part 1)

T

IND

QTY

PRICE

Page No. 12 05/31/95

DATE

inv Type

NDC

ID CA-UC-04

DESCRIPTION

			200		
		4 ″⊬			
07/13/94 W	00025191131	CALAN SR	I	100.00	92.46
07/13/94 W	00088177147	CARDIZEN 30MG 100CT	s	100.00	34.20
07/13/94 W	00049276066	Cardura (Doxazosin Mesylate) Oral Tablet	S	100.00	69.65
07/13/94 W	00009022501	CLEOCIN HCL 150 MG HFC	I	16.00	15.43
07/13/94 W	00007336203	COMPAZINE (PROCHLORPERAZINE) SUPPOSITORY 2	s	12.00	26.71
07/13/94 W	00056017070	COUMADIN	8	100.00	44.66
07/13/94 W	00031425063	DONNATAL TABLETS	N	100.00	10.06
07/13/94 W	00046042281	INDERAL TABS 20 MG NDA-16-418	I	100.00	33.71
07/13/94 W	00006005068	INDOCIN 50MG CAPSULE 100	1	100.00	69.59
07/13/94 W	00006015030	INDOCIN 50MG SUPPOSITORY 30	8 .	30.00	36.71
07/13/94 W	00075070000	LOZOL	ន	100.00	51.49
07/13/94 W	00009005604	MEDROL 4 MG CT	I	21.00	9.24
07/13/94 W	00078000305	MBLLARIL 25MG	1	100.00	31.48
07/13/94 W	00037421330	ORGANIDIN	N	1 -10.00 480	9.00 62.28
07/13/94 W	00062178115	ORTHO NOVUM 7/7/7 28 TABLETS	s	168.00	113.89
07/13/94 W	00045034260	PANCREASE/MT (r) pancrelipase capsules	N	100.00	54.95
07/13/94 W	00029321120	PAXIL (PAROXETINE HCL)	8	100.00	154.79
07/13/94 W	00597001901	PERSANTINE (DIPYRIDAMOLE USP) TABLETS, 75MG	I	100.00	58.41
07/13/94 W	00087047603	POLY-VI-FLOR CHEWABLE TABLETS W/IRON 1.0	N	100.00	13.26
07/13/94 W	00046086881	PREMARIN TABS, .3 MG NDA-04-782	ន	100.00	21.73
07/13/94 W	00087058005	- Industry and Address and The Control of the Contr	B	378.00	29.47
07/13/94 W	00062027501	RETIN-A CREAM .1% 45 GM TUBE	s	45.00	48.24
07/13/94 W	00062017512	RETIN-A CREAM .05% 20 GM TUBE	s	20.00	21.95
07/13/94 W	00009030503	ANSAID 100 MG PCT	B	100.00	96.69
07/13/94 W	00009074203	NOTRIN 600 MG PCT	I	100.00	12.53
07/13/94 W	00006072068	VASERETIC 10-25 TABLET 100	s	100.00	87.07
07/13/94 W		VERELAN CAPSULES 180 MG 100	s	100.00	87.71
07/13/94 W		ACCUPRIL (QUINAPRIL HCL) TABLETS	s	90.00	66.61
07/13/94 W		NIFEDIPINE CC 60MG BTLE 100 EXTENDED REL	I	100.00	118.84
07/13/94 W	58887011530	ANAPRANIL (CLOMIPRAMINE HYDROCHLORIDE)	B	100.00	64.65
07/13/94 W	00009030530	•	s	100.00	97.63
07/13/94 W	00029609022	AUGMENTIN (AMOXICILLINCALVULANIC ACID) SUS	ន្ធ	150.00	39.29
07/13/94 W	00075006037	AZNACORT	s	20.00	33.90
07/13/94 W	00087081841		s	100.00	48.99
07/13/94 W	00088179742		s	90.00	130.13
07/13/94 W	00009332901	CLEOCIN T TOPICAL 1 PCT LOTION	g	60.00	21.73
07/13/94 W	00009311602	CLEOCIN T TOPICAL 1 PCT SOLUTION	8	60.00	18.87
07/13/94 W	00009344801	CLEOCIN VAGINAL CREAM 2% 40 GRAM TUBE	S	40.00	23.85
07/13/94 W	00085056701	ELOCON CREAN 0.1% 15GM TUBE	8	15.00 /100.00	11.96
07/13/94 W	00074631613	ERYTH ST 500MG ERTHROMYCIN STEARATE USP	N	129.	00 14.38
07/13/94 W		GEL-KAM HOME CARE 4.3 OZ MINT	N	100.00	6.38
07/13/94 W		K-DUR TABLETS 20N EQ 100 PER BOTTLE	S	100.00	29.41
07/13/94 W		LOTRIMIN CREAM 1% 15GM TUBE	I S	15.00	8.87 175.11
		NEVACOR 40MG TABLET 60UU	s	60.00	
		nasacort nasal inhaler NIZORAL SHAMPOO	8	1 400 120	
90° 0 000 12 00 00		PARLODEL 2.5MG	8	30.00	36.70
7 m	00003017850	PRAVACHOL	8	100.00	146.98
	00187039631		N	29	35 24.30
			600		

Page No. 13 05/31/95 ID CA-UC-04

DATE	TYPE	NDC	DESCRIPTION	IND	QTY	PRICE
07/13/9	4 W	00072830360	T-STAT PADS	N	60.00	15.13
07/13/9	4 W	00072830060	T-STAT	N	60.00	13.48
07/13/9	L W	00062535101	TERAZOL 3 SUPPOSITORIES	s	3.00	18.94
07/13/9	4 W	00062535601	TERAZOL 3 CREAM	ន	20.00	18.94
07/13/9	ŧ W	00062535001	TERAZOL 7 CREAM	s	45.00	18.94
07/13/9	4 W	00006336703	TIMOPTIC 0.5% OCUMETER SML	s	5.00	13.88
07/13/9	4 W	00006336710	TIMOPTIC 0.5% OCUMETER 10ML	s	10.00	26.91
07/13/9	4 W	00006336712	TIMOPTIC 0.5% OCUMETER 15ML	s	15.00	40.27
07/13/9	ı w	00065064705	TOBRADEX	s	5.00	16.70
07/13/94	w a	00998064305	TOBREX	s	5.00	14.23
07/13/94	W	00039001123	TOPICORT (DESOXIMETASONE) 0.25% EMOL CRE	S	15.00	13.29
07/13/94	L W	00072810015	WESTCORT CREAM	s	15.00	10.17
07/13/9	W J	00186033001	XYLOCAINE 2% JELLY (LIDOCAINE HCL)	1	30.00	11.15
07/13/94	r M	00003045250	CAPOTEN	s	100.00	56.18
07/13/94	. W	00003048250	CAPOTEN	ន	100.00	96.33
07/13/94	W I	00002505818	CECLOR	s	75.00	22.69
07/13/94	F M	00038004010	ELAVIL 10 MG. 100'S	I	100.00	15.20
07/13/94	ł W	00023791560	ELIMITE	s	60.00	13.37
07/13/94	W	00085056702	ELOCON CREAM 0.1% 45GM TUBE	s	45.00	21.90
07/13/94	. W	00085037001	ELOCON CINTMENT 0.1% 15GM TUBE	8	15.00	11.96
07/13/94	L W	00662412066	Glucotrol Tablets (Glipizide) 10 mg	ន	100.00	51.11
07/13/94	W	00081024275	LANOKIN TABLETS (DIGOKIN)	s	1000.00	70.78
07/13/94	W	00085092402	LOTRISONE CREAM 450M TUBE	5	45.00	28.76
07/13/94	N I	00006073161	MEVACOR 20MG TABLET 60UU	s	60.00	97.84
07/13/94	W E	00585067104	NASALCROM	s	26.00	33.40
07/13/94	. w	57706075723	NEPTAZANE METHAZOLAMIDE TABLETS 50MG 100	s	100.00	64.77
07/13/94	W	00071057024	NITROSTAT (NITROGLYCERIN TABLETS USP) SU	N	100.00	5.03
07/13/94	W	00006070520	NOROXIN 400MG TABLET 20UU	s	20.00	40.39
07/13/94	W	00006096358	PEPCID 20MG TABLET 100UU	s	100.00	121.28
07/13/94	W	00006074231	PRILOSEC 20MG CAPSULE 30UU	ន	30.00	90.85
07/13/94	W	11980026021	PROPINE W/C CAP B.I.D.	s	15.00	31.65
07/13/94	W	00009336705	ROGAINE TOPICAL SOLUTION	s	60.00	47.16
07/13/94	W	00310010710	TENORMIN 25 MG 100 TAB BOTTLE	s	100.00	72.32
07/13/94	W	00456045901	ARMOUR THYROID 1GR	N	100.00	7.91
07/13/94	W	00085064902	VANCENASE POCKETHALER 42MCG/ACTUATION 7G	g	7.00	24.43
07/13/94	W	00085073604	VANCERIL INHALER 42MCG/DOSE 16.8GM CANIS	s	16.80	24.43
07/13/94	W	00006071268	VASOTEC 5MG TABLET 100	g	100.00	74.47
07/13/94	W	00028016201	VOLTAREN (DICLOFENAC SODIUM)	s	100.00	77.51
07/13/94	W	00173034409	ZANTAC TABLET 150MG 100'S BOTTLE	s	100.00	135.66
07/13/94	W	00173039340	ZANTAC TABLET 300MG 30'S BOTTLE	s	30.00	73.40
7/13/94	W	00026884151	NIFEDIPINE CC 30MG BTLE 100 EXTENDED REL	I	100.00	68.69
07/13/94	W	00039010410	ALTACE (RAMIPRIL) 2.5MG CAPSULES	s	100.00	59.45
07/13/94	W	00597007017	ALUPENT (METAPROTERENOL SULFATE, USP) INHAL	s	14.00	16.13
7/13/94	W	00597008214	ATROVENT (IPRATROPIUM BROMIDE) INHALATION	s	14.00	22.97
7/13/94	W	00029608522	AUGMENTIN (AMOXICILLINCLAVULANICACID) SUSP	s	150.00	20.63
7/13/94	W	00029608027	AUGMENTIN (AMOXICILLIN/CLAVULANIC ACID) TA	s	30.00	63.71
7/13/94	W	00081019302	CORTISPORIN OPHTHALMIC SUSPENSION (POLYM	I	7.50	13.38
7/13/94	M	00056016970	COUMADIN	s	100.00	42.73
7/13/94	W	00056017670	COUMADIN	s	100.00	45.95
7/13/94	W	00039005110	DIABETA (GLYBURIDE) 2.5MG TABLETS	s	100.00	22.18
7/13/94	W	00071036224	DILANTIN (EXTENDED PHENYTOIN SODIUM CAPS	N	100.00	15.38
7/13/94	W	00071073720	LOPID (GEMFIEROZIL) TABLETS	s	60.00	53.53
7/13/94	W	00085061304	LOTRIMIN CREAN 1% 45GM TUBE	I	45.00	18.24

Page No. 14 05/31/95 ID CA-UC-04

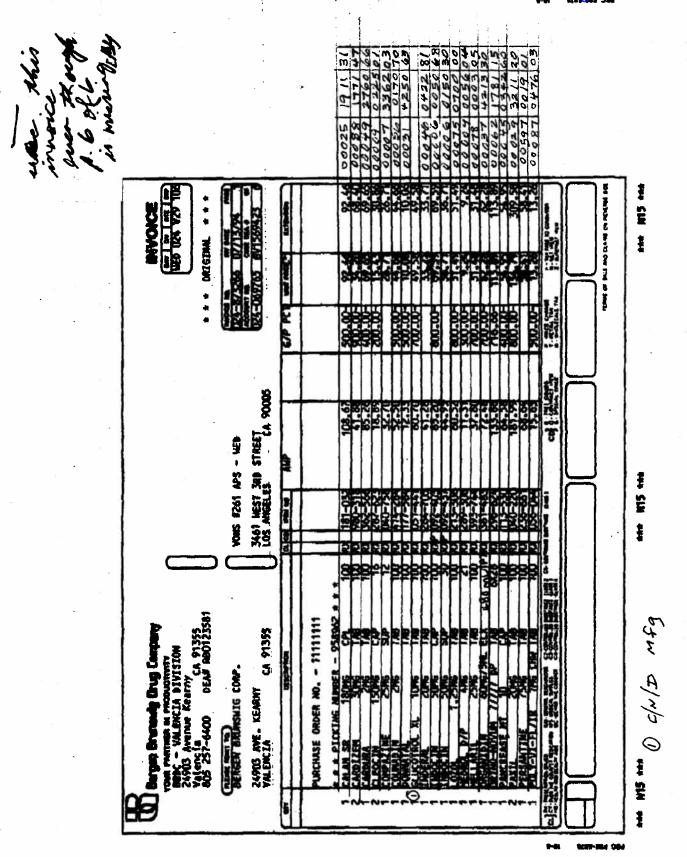
DATE	inv Type	NDC	Description	IND	QTY	PRI	CB	
07/13/9	94 W	00299383528	METROGEL	s	1	s.or 28.35	18.97	-
07/13/9	94 W	00071057013	NITROSTAT (NITROGLYCERIN TABLETS USP) SU	n		0.00	11.41	
07/13/9	14 W	50458022115	NIZORAL CREAM	s	1	5.00	10.97	
07/13/9	4 W	00069153066	Norvasc (amlodipine besylate) Tablets 5M	8	10	0.00	92.59	
T	7	-	T	INV	OICE TOTA	7	4791.97	/
		-		PHAR	TACY TOT	AL	4791.97	٠

T- Traced to invoice and each IDnumber late, invoice type, drug name and quantity was correct unless changed.

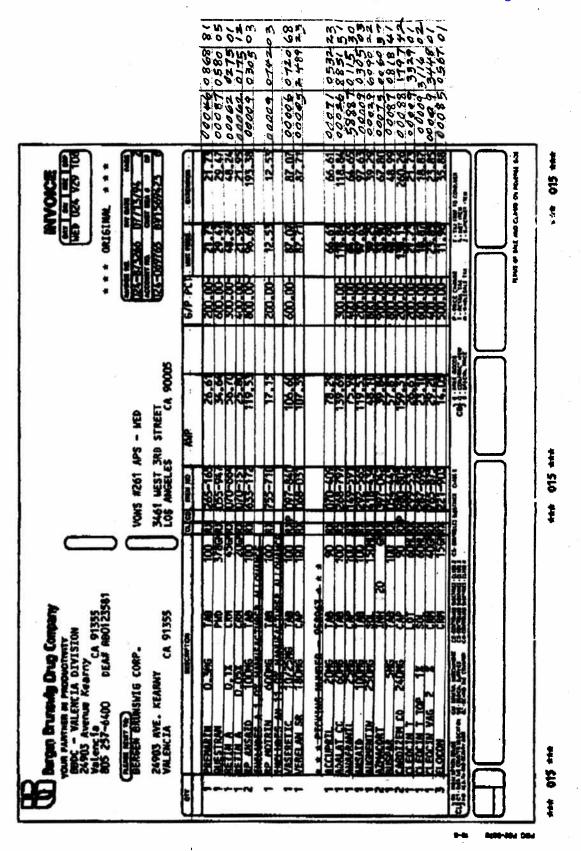
6-1-95 CSO

6-1-95 CSO

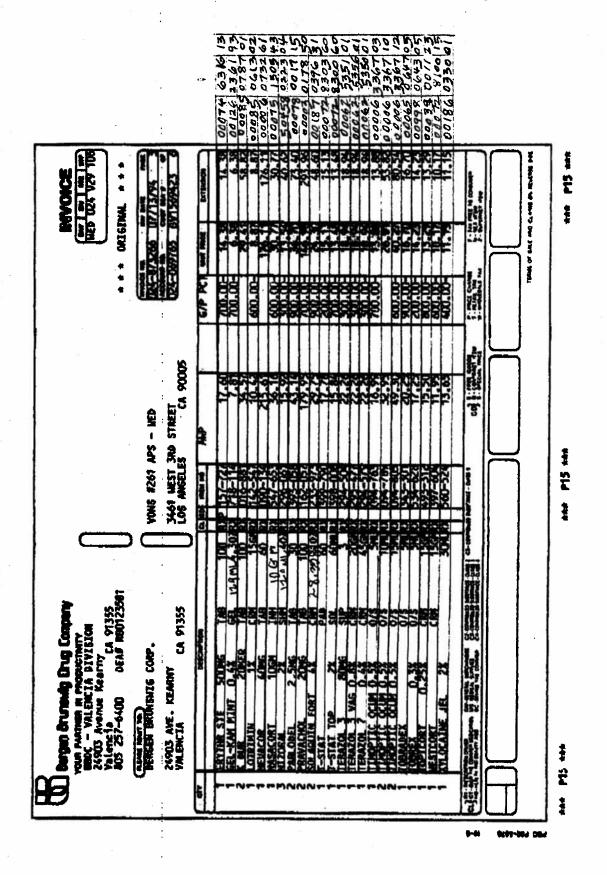
6-1-95 CSO

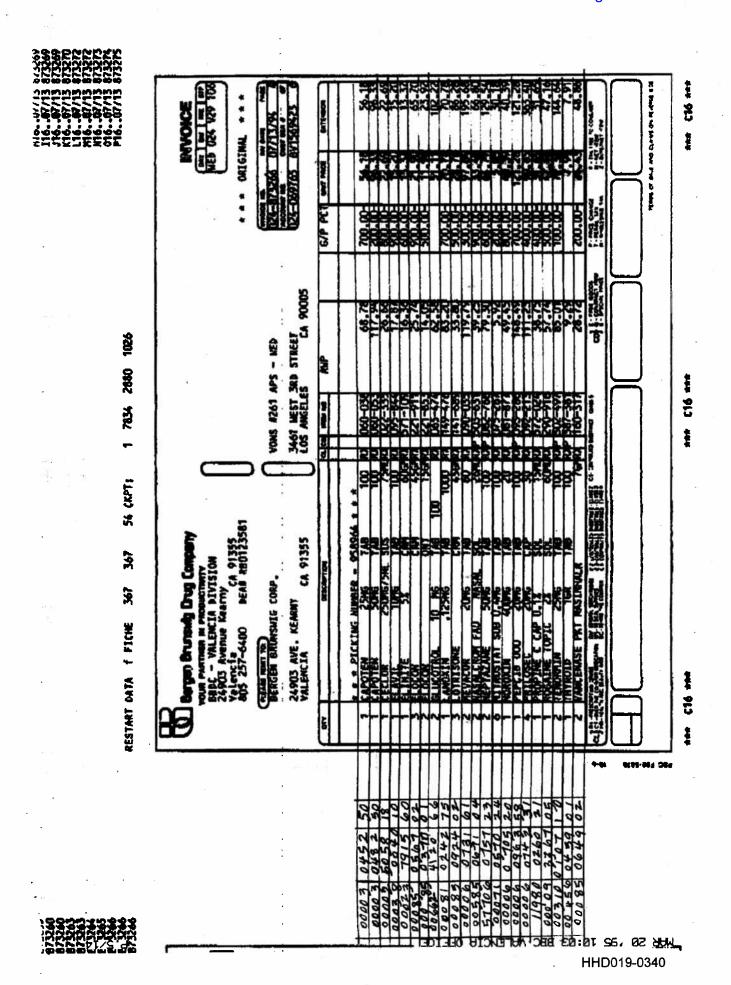


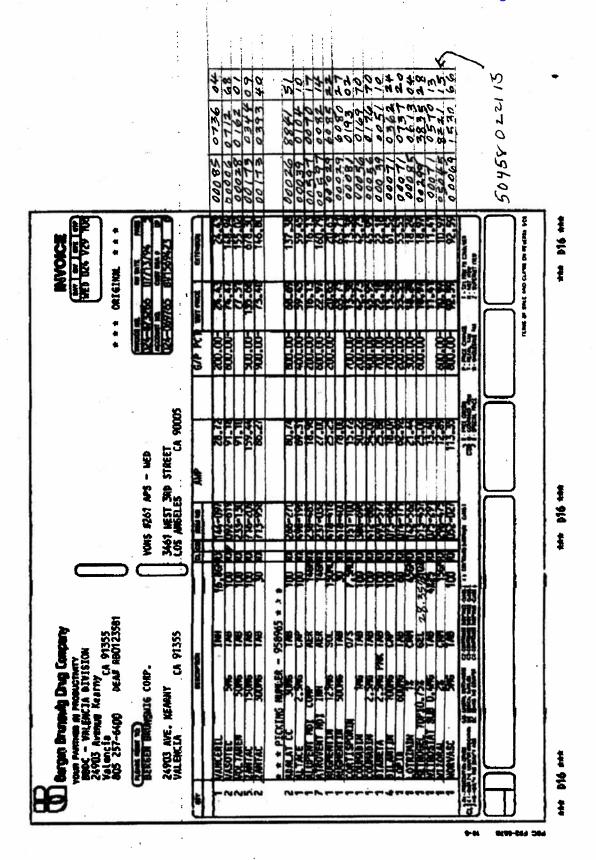
WHY SO .32 TO:00 BEC ANTENCIN OFFICE

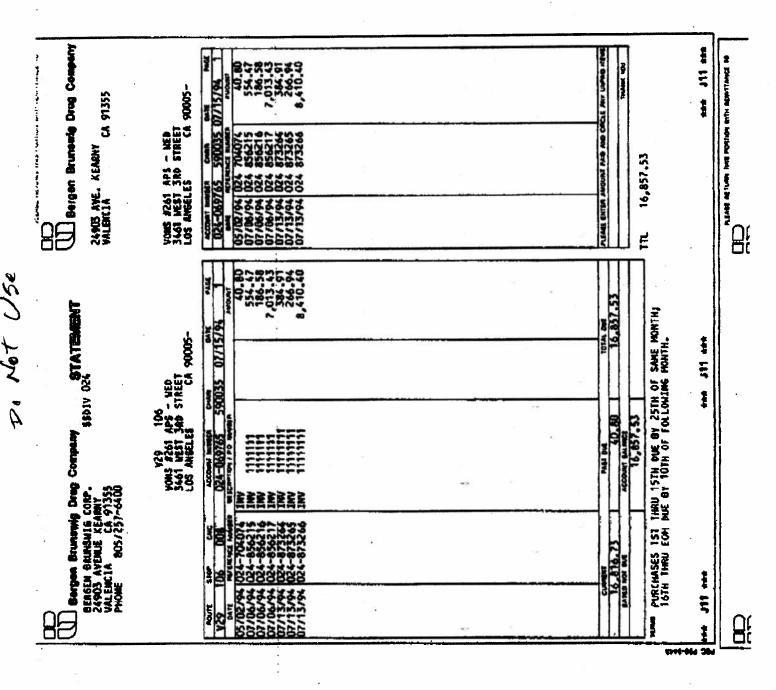


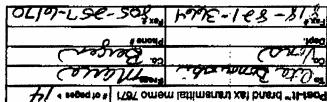
WHE SO . 32 TO: 01 BBC ANTENCIN OLLICE 8880-9100HH











P.1/14

MAR 20 795 09:59 1919C VALENCIA OFFICE

	Confidential Pharmacy Information Form
Pharmacy Name:	VONS PHARMACY #261
Address:	3461 W. 3 rd ST.
	L.A., CA. 90020
Phone Number:	818-821-7731
Contact Person:	ERIC CONGDON, THIRD PARTY ADMINISTRATOR
	Type of Pharmacy (Check Appropriate Block(s))
•	endent Retail Pharmacy (four or more stores) Pharmacy Pr:
	Nursing Home Pharmacy Hospital Outpatient Pharmacy
	Home I.V. Pharmacy Mail Order Pharmacy County Public Health Unit Pharmacy
	Public Health Entity

	Pharmacy Information For	Confidential m
Pharmacy Name:	Payless Drugs 4074	
Address:	807 South Main	
	Veeka CA 96097.	
Phone Number:	916-842-7301	· .
Contact Person:	GARY W. SAMS	
	Type of Pharmacy (Check Appropriate Block(s))	
Chain Othe		□ ▼
	Nursing Home Pharmacy Hospital Outpatient Pharmacy Home I.V. Pharmacy Mail Order Pharmacy County Public Health Unit Pharmacy Public Health Entity	

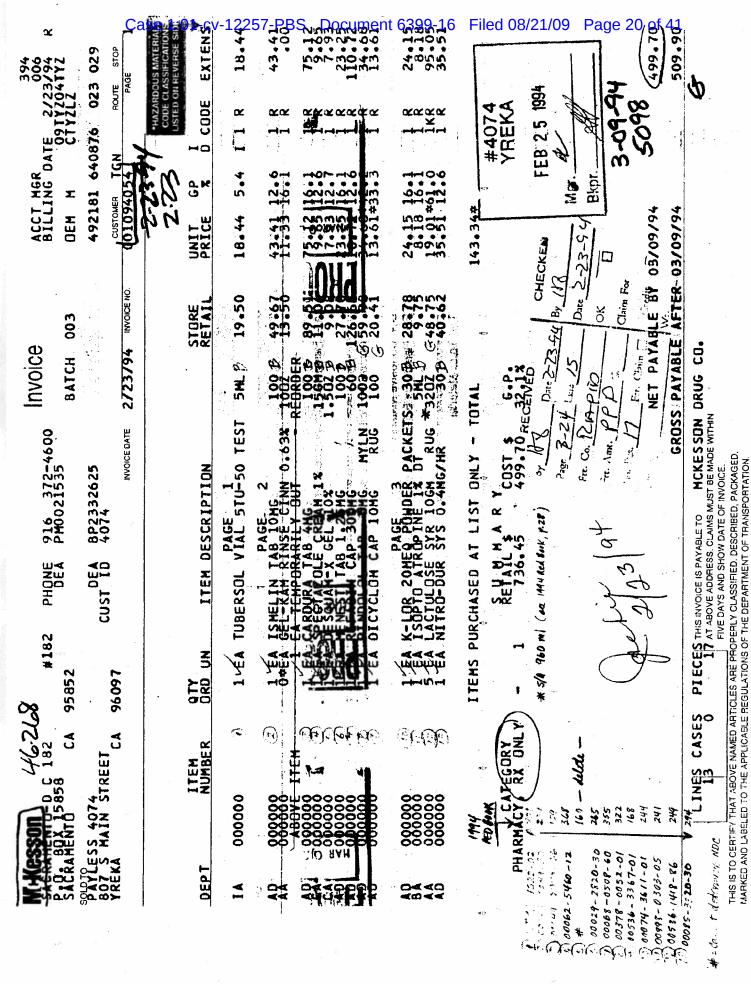
	DATE	IMA.	MDC	3/6	DESCRIPTION	PTION		gry	PRICE	TOTAL
CA-RC-117	02/23/94 £	3 2	£ 117937 52302 €	щ	TUBERSOL VIAL STU-50	TEST	5AL #	uc	48.81	
CA-RC-11	02/23/94	3	00083004930	A	ISERLIN TAB 10KG		1001	, 00		
CA-RC-11	02/23/94	*	00049277066	Д			100	001	15.12	
CA-RC-11	02/23/94	*	00062546012	A	SPECTALOLE CREAK 18	-			3 4	
CA-RC-11	02/23/94	7	2030	A				67	, c	
CA-RC-11	02/23/94	*	00068050860	Д	RIFADIN CAP 300MG			2		
CA-RC-11	02/23/94	*			0.00	,		9 (77.017	
CA-RC-11	02/23/94	7	6701		STATE OF STATE	1	100T	001	34.68	-
CA-RC-11	02/23/04 F	7			PROTESTIONS		700	100	13.61	
	200 CC CC	t 3				CKBTS	30	9°	24.15	
77.04.4	#K/C2/40	P ;	5050				SEL.	in	8.18	
CA-AC-11	02/23/20		_	•	LACTULOSE SYR 10GE	RUC 32	3201	32	19.01	
5-KC-11	02/23/94	-	0008532030	m m	MITEO-DUR SYS 0.4MG/KR	'XB	30	30	35.51	415.73
CA-RC-11	02/21/944	ပ	£ 39506001125 £1	A	BLDEPRYL TAR SHG	i co		4		
CA-RC-11	02/21/94	υ		U		2	4	2 0		
CA-RC-11	02/21/94	ပ		Д	TRUBAN TAR SONE	•		200	00.00	
CA-RC-11	02/21/94	ပ	-				2	007	7 4 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
CA-RC-11	02/21/94	ບ	n attack		OROGE AND MALEON	Ŧ		000	60.27	
CA-RC-11	02/21/94	U	8013		CHOCK GREE BEE GREATH	6	9 6	007	88.35	
CA-RC-11	02/21/94	U	00074338913 31		DOM THE FOURT	900	001	60 m	10.55	
CA-RC-11	02/21/94	Ü	00029600823	ן פּי	MACANT CHOCK COLOR	17	007	ח ח ח	120.36	
CA-8C-11	02 121 104			9 (BACALL BUSP 12356	1001	TE T	100	1.00	
		, (02614070276	20.	TRAMSDERE-NITRO 0.6EG/KR		30	000	48.89	
11 - 20 - 20	00 00 00 00 00 00 00 00 00 00 00 00 00	, ر	- 54-9		AMPICIL CAP 250MG	EYL 50	5008	200	19.80	
77-24-4	04/41/94	د	6881	Да	PREMARIN TAB 0.3MG	-	100	100	22.41	
CA-HC-11	02/21/94	Ü	00689011901	Д	LEVOXINE 15 RCG DP	011901	100	100	4.32	
CA-HC-11	02/21/94	ບ	00074632013 1	 DD	BRY-TAB 333MG B/C	Ä	100	100	12.40	
CA-RC-11	02/21/94	ຍ	00002513287	<u> </u>	CECLOR O/S 375MG	50	SOME	 D	23,30	
CA-RC-11	02/21/94	ပ်	00085045803	, p	CLARITIN TAB 10MG	7	100	100	155.46	
CA-RC-11	02/21/94	ပ	00087081841	 20	BUSPAR TAB SEG	=	100	100	48.55	
CA-RC-11	02/21/94	υ	00332312509	 E	DIC	BIO 10	100		45.50	
CA-RC-11	02/21/94	U	00689011701	60	LEVOXINE 25ECG DP	011701	100	# C C C	44.6	
CA-RC-11	02/21/94	ပ	00033243742	æ æ	CARDEMB CAP 20EC		100	100		
CA-RC-11	02/21/94	ပ	00168007038	ra ta		FOUG 1/801		, , , , ,		
CA-RC-111V	02/21/94	ບົ	, 59772246301 _ 0		HADOLOL BORG APOTH 24		100	1001	EC 60	
	•						,	1		

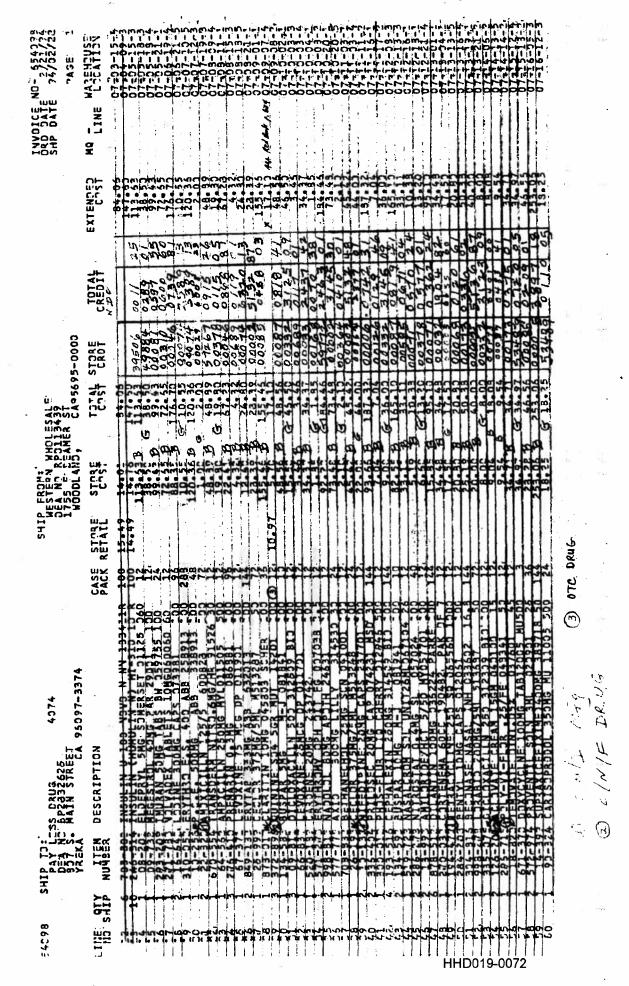
I alcording to Paul Waser, thus data will met to week; do not muity. Was 4/26/95

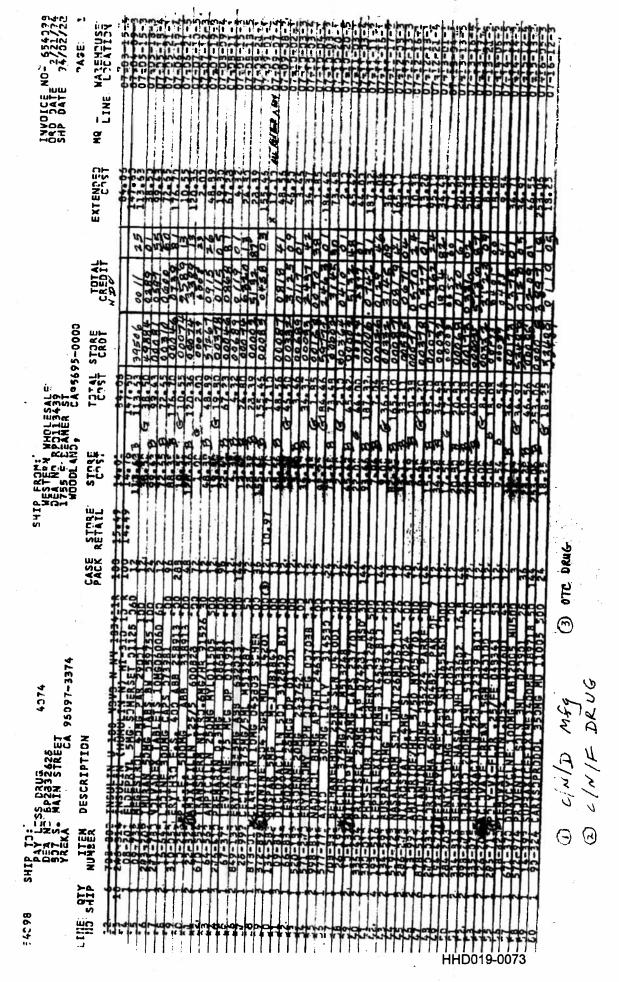
	TOTAL																							4	e k												
	PRICE		2.10 4	1 68-42	22.00	99.16	7.0				9 6 6	9.9	: 50 ° 50 ° 50 ° 50 ° 50 ° 50 ° 50 ° 50	34.48	£ 17.50		25, 19	20.00	00.8	70.6	9. 20	34.31	34.93	23.28	253.06	18.25	101.68	63.91	68.56	1.94	84.32	25, 19	1.90	409.13	44.63	345.66	142.00
	QTY		100	100	100	96	2009	100	100	200	100	100	100	420			16.8	05	100	L N	- C	. J	2009	25	20	200	30	100	100	100	100		30	1000	100	1001	100
			41	• "				-	- energy		Pangrip,		(,3+	******	e tar iyi	Bey ~ast. Ç	44 () ()	aryan i	t angal taur d	*2 . ·	t in and	. y - 9 - 2	200°	.संद : स.		پ سر	* * .40	×		100	. њч		٠.			>)
	TON		SCKB 100	100 ML	SCKE 100		500		.100	• • •		NYLK 1008	100	ROWELL 7X60KL	250MG APO 1M8	100	3 16.8GM	SORL	001 00	15GH	SEC SORL	# 5 G M	12005 KU	3ML ,25	9	MUT 5001	30	100	100	153501	100	TASAL TOR	POUG 30GM	1000	100	100	100
	DBSCRIPTION		BETARRECHOL TB 25EG 8	CECLOR O/S 375EG	NIPRDIP CAP 20MG SC	DEPOT PRILOS CAP 20MG U/U	PHOS-FLUR ORAL LIQ CHERY	CBPKALBY CAP 250MG E	BUSPAR TAB 10KG	MASALCROM MASAL SOL 40MG	NITROSTAT SUBL TAB 0.4MG	AMILOR+MOTE TAB 5/50 MYLM	DILANTIN KAP 100MG	CORTEMBER BREER ROWE	THTRACY/SURY CAP 250MG	BEHTYL CAP 10MG	BECOMASE MASAL INVALER	LORABID O/S 200MG/5ML	DICLOXAC CAP 250MG BIO	ACLOVATE CRE 0.058	POLY-VI-FL+IR DROP 0.25EG	TEMOVATE CREAM 0.05%		PROVENTIL SOL 0.0834 3	SUPRAX TAB 400MG	CARISOPROD TAB 350MG	HABITROL PATCH 21MG	LOPRESSOR TAB 100MG	PRINIVIL TAB 10XG UU	PSEUDOSPHEDRINE 60 GG	VISKEM TAB 10KG	VANCENASE POCRTRALER HASAL	MYSTATIM+TRIAE CRE F(AICROHASH TAB SEG	DYBACIRC CAP 2.5MG	ACCUTAND CAP 40MG	PARELOR CAP 50EG
Ž	B/G		.	m	g.	Pi	Д	U	Д	Д	A	G	ф	æ	G	A	æ	æ	u	æ	A	æ	ı	A	æ	وع	А	Д	Д	o	—	m	.	æ	Д	m,	Д
•••	MDC	•	003640410014	00002513248	00364237701	000006074231	00126012946	00332314509	00087081941	00585067104	0007 1057024	00378057701	00071036224	00032190482	00003065560	00068012061	00173033602	00002513687	00332312309	00173040100	00087048341	00173037501	53489012005	0008205000	00005389718	53489011005	58881083026	00028007101	000006010658	00761153501	00078007305	00085064902	00168008130	000000017101	00078022605		00078007805
TYPE	THE		ن د د	<u>ت</u>	ပ	ပ	υ	Ü	Ü	ပ	U	U	U	ပ	e,	_ا	ပ	U	U	Ü	ບ	Ę,	U	Ü	ပ	ບ	U	ပ	ပ်	Ü	U	U	ပ	ບຶ	Ü	U U	U U
	DATE		02/21/944	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02721/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94
	A	,	CA-RC-117	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11 5	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	C.AKC-11 ♥

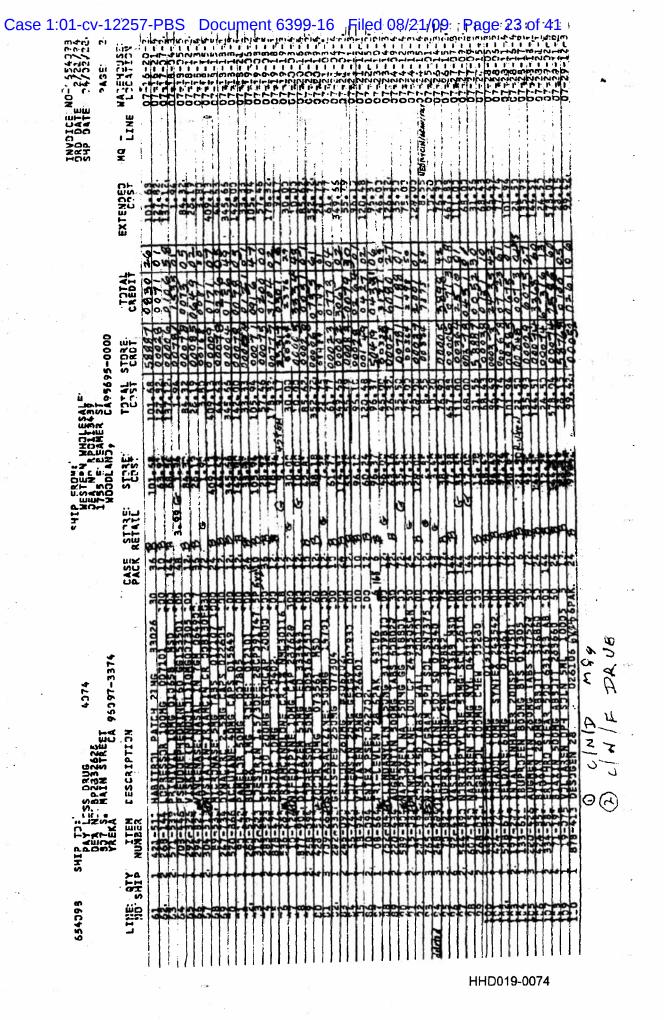
	TOTAL						-																					**								-
	PRICE	144.514	1 1/2	99.42	22.39	8.80	26.90	36.98	3.50	28.60	14.75	0.00	1.40	48.40	35,16	15.75	1.68	24.08	13.50	97.64		97.79	22.00	7. 1.	28.55	19.35	27.20	30.00	28.20	117,42	41.71	139.86	39.06	40.00	#0.98	1.50
	QTY	80 1	-> s	168	4 22	. 00	10	100	100	08	10	 N	100	100	413	100	100	200	100	100	\$4 X9+	2004	200	150	100	17	20	100	25	168 /	1001	100	120	500	100	10
		¥ 09	ብ 	. 8			1	100	100	30		····	100				•	 13			- est-	09	~ ~			Ħ		-			0	۰	0		· .>	>
	*	₩.	SAL	6 X 2 8		SOML	10 KL	16	D.M.	•	10	SYR	33001	100	473KL	100	100	SOME	100	100	34 16051	9	500	150KL	100	17 G E	2 5 KL	100	15008	K 6X2	100	100	120	500	100	1602
	DESCRIPTION	DEPOT BIAXIN TAB 500MG	VOLTARBH OPHT SOL	DESOCRE TAB	MASALIDE SOL 0.025% PURP	VI-DAYLIN/F ADC DROP	TIROPTIC 0/S . 5% OCURBI	PREMRKIN TAB 0.9EC	HYDROXYSHB RCL 25 12701		TIGAN SUPP 200MG	INITERN 8/DOSE SYST PREF SYR 2	LEPRABINE 10MG MUT 33(BSGIC-PLUS TAB	SEPTRA SUSP CREERY	CEPHALEX CAP 500EG BIO	KYDRAL TAB 10MG MUT	SUPRAN O/8 100MG/SEL	HAPROXBE TAB 37 SEG MYL	AMBAID TAB 100MG	PERIDEX ORAL RINSE * 3)	DEPOT EBYACOR TAB 20 MG	AROXIL CAP 250EG	AMOXIL SUSP 125MG	PROVERA TAB 2.5MG	DEPOT VENTOLIN INHALER	BECOMASE AQ SPRAY 0.0428	PREERRIN TAB 0.625EG	ALBUTEROL INVAL SOL 3EL 15008	ORTHO MOVUM 7/7/7 DIALPAR 6X28	AICROMASE TAB SEG	DEPOT SANTAC TAB 150EG	INTAL HEBULISER AMP 2ML	AROXIL CAP 500MG	PREERLIN TAB 1.25EG	SULPATRIM PED SUSP B/M
É	9/6	Д	E	m	æ	Д	æ	Д	U	pa,	Д	æ	U	m	А	U	U	А	G	æ	æ	А	9	U	А	Д	д	А		д	A	Д	A	G	Д	U
	ИВС	\$000742586604	\$8768010005	00052026106	00033290640	00074110650	00006336710	00046086481	53489012701	00173039340	00029408438	00173044903	53489033001	00456067801	00081085596	00332314709	53489012301	000005389840	00378055501	000000000000	37000000000	000000013161	00029600632	00029600822	000000000404	00173032188	00173036879	00046086781	59930150008	00062178115	00000017105	00173034409	00585067303	00029600732	00046086681	00472128516 [
TYPE	INV.	£.	v	Ü	Ü	Ü	Ü	Ü	Ü	Ü	Ü	Ü	Ü	U	Ü	Ü	Ü	ບ	Ü	Ü	 ပ	Ü	ບ	U	ပ	ບ	C)	Ü	ပ	ပ	Ü	ပ	ប	 ပ	جو. ن	Ü
	DATE	02/21/94t	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94
	A	CA-RC-11 T	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-BC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11 V	CA-RC-11 /

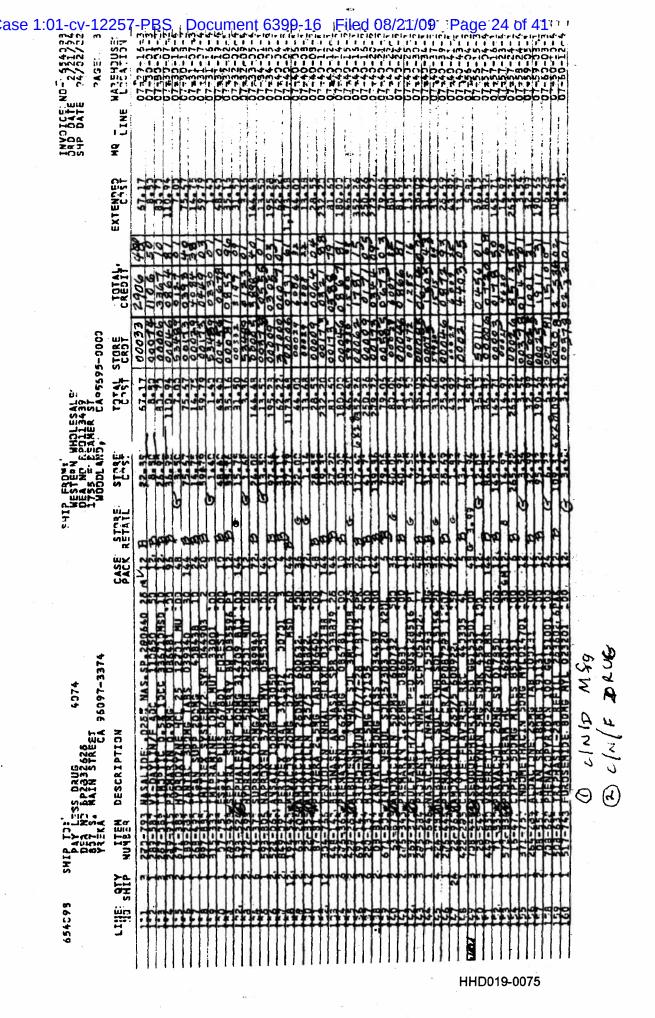
														/ ! ~																								4	W W	
TE CYCLE I.	TOTAL					à			•			•		-																			`	12859.65 /		•	K 4/24/85		13275.38	
# C+ 00	FRICE	37.68 €	34.15	63.33	2.50	145.58	12.45	100.12	2.31	153.48	14.25	* 85	551.13	23.68	135.53	49.05	84.08	57.74	13.25	17.25	20.00	70.43	18.49	30.00	93.54	129.47	4.85	25.53	16.94	64.28	 	17.00	27.23	83.39	. 7	ancom	date fell. Will	1	`	
5	X I Z	1000	30	30	16	20	100	100	100	100	100	100	1000	7		100	100 5	100	100	100	100	100	1000	1000	100	100	100	100	100	100	16	200	2008	100		all course formions	made to di			
		100 1	30 ML	30	160%	20	1001	100	100	100	1008	100	1000	14GM 0	20	100	100	100	100	100	1001	100	1000	1000	100	100	1008	100	100	100	16058	5000	EXECT .	100		MOVE	R	•		
#Ormar a	DESCRIPTION		SOL 58		HALS		SCHB	4	BOME GBM		MYL	IB SCKB		ABRO COMPL	9				KG GBM	G 1874	7.5/750 WAT 1	MG T540	G 141010	LERN	3.75%G		MAL	TAB		TAB 1.0EG RX PR	B/M 1	5/5C WAT :				•	WE 4/26/05		-	
, and a second	DBS	PAMBLOR CAP 10MG	ALUPBIT INNALANT	TACARIST TAB 800RG	PROESTRAS VC SYRP	PLOXIM TAB 300MG	PRIMIDONE TAB 250MG	AMAPROX TAB 550EG	PROPRANCIOL TAB 80MG	PAXIL TAB 20MG	PENOPORF TAB SCHE	BUTAL+APAP+CAF TAB	DEPOT CAPOTEM TAB 25EG	ATROVBUT INKL AE	DURICEF CAP SOOMS	RU-TUSS T/R TAB	CORGARD TAB 40EG	SYMALGOS-DC CAP	RLPRAIOL TAB 0.5MG	ALPRASOL TAB 1MG	KYDROC+AP TB 7.5/	PALNIN NX TAB SORG	REPROBARAT 400 GG	ACBTAK+COD TB #3	TRANXBUB T-TAB 3	AMBIEN TAB 10NG	CLORAIBP TAB 15EG	TYLEMOL+COD #3 TA	PROSOM TAB 2MG	KLONOPIN TAB 1.0]	HYDROMBT SYRP	HYDROCOD+AP TB 5.	PROPOX+AP TAB 1C/650 PR	PIORIMAL+COD CAP				7	1 1 2 2	•
	9 / 8	tb P	A	A	e.	A	р. 19	Æ.	<u>д</u> ,	д	9	D	A	Æ,	Д	д	r r	S A	9	9		PA	E	e e	A	A	O O	A	Д	A	A	5		E E		:	Annual Control			•
ş	RDC	00078008605	00597007130	00108502713	00879051416	00062154102	00364036601	18393027642	00781138401	00029321120	00378047101	00364229701	000000045275	00597008214	000007078446	00048005801	000003020750	000008419101	00781132701	10026118100	52544038701	00024195104	00781141010	00003015010	00004438913	00025542131	00378007001	00045051360	00074373613	00004005801	00472103016	52544034905	00378015505	00078010705	Thosed to curlage		ester: Co	l exteriotion		
TYPE	TMC.	40	0	v	0	υ	Ü	Ü		Ü		υ			¥. 19 449.7	U	 U	U	 U	 U	U	Ü	U	U		U	U	Ü	U	 U	Ü	υ 		D C	Thuck	7		renfeed	() () () () () ()	
e e	DATE	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	02/21/94	£ +	(1)	1.1	C = >	> >	
f	CT .	CA-RC-11T	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11	CA-RC-11 }	CA-RC-11	CA-RC-11	CA-RC-11	Files Cal. Wg1					

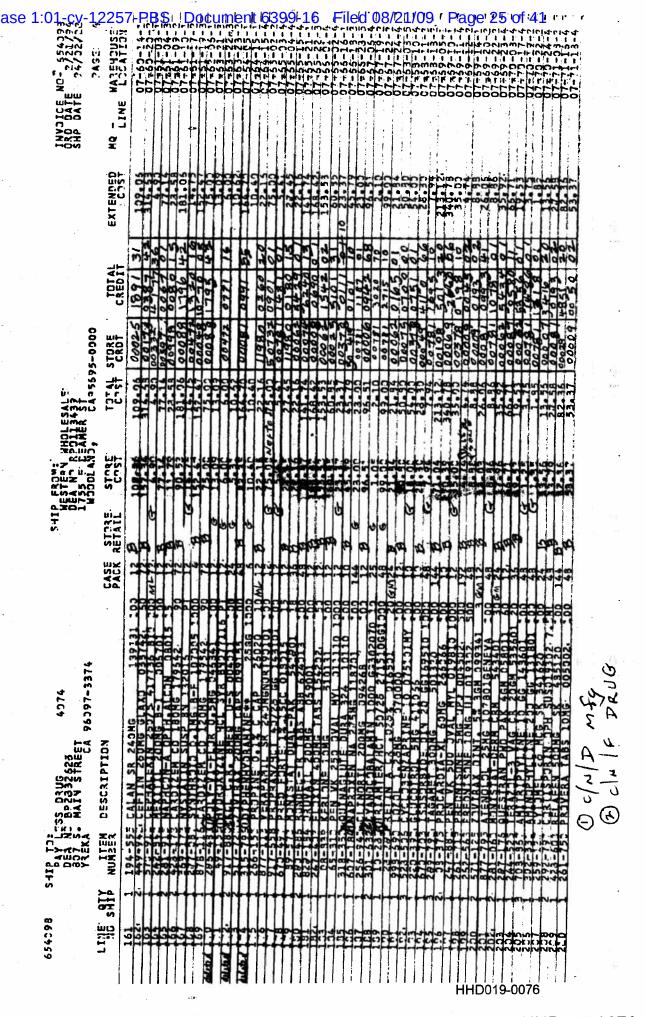


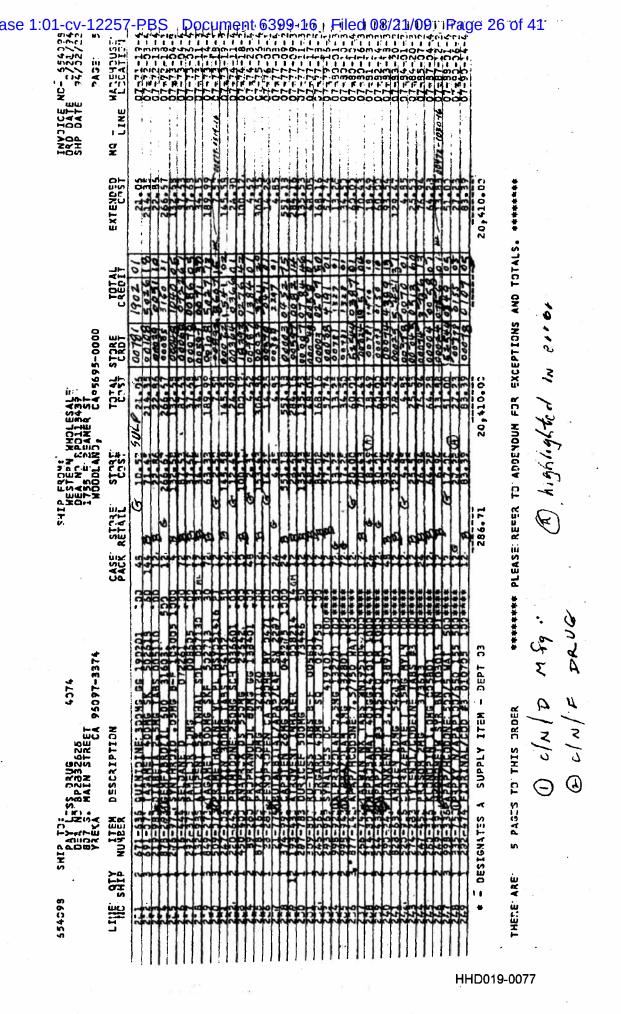




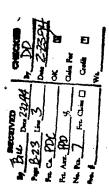








1870163 NO- 854594 1872 2/22/94 STE DATE 2/22/94		TITINIED	24,413.59		TIVIZE &
EDICEST THE THE THE		THOLS,	ICIPI		LECO
ZELP FROM: WESTERN YHOLESALZ DEA NO APOLISAGA 174 WOODLAND. OAL 98695	**** PICEPTIONS AND TOTALS ****	NOILEI	R 5808 20,417,88 CEEDIT TOTAL	-TSID#HERE TEREMFOIST-	TOOST & RETAIL DEPT
SHIF IC: 4074 PAI LISS DRUG LEA NO EPRESZESS 407 S. MAIN STREIT 1 TREIA CA SSOSP-3274	4. 特许者存存	LINE CTT QTT ITEM DESCRIPTION NO GAD SSIP NUMBER	ACCIS CZARGED PURCE, MAR 5608.	**ALL CONTRCLIZD DRUGS RECEIVED AS ELLIEDE FEARMECIST-	EEST COST RETAIN DEST



Ħ	DATE	THY.	NDC B/G	DIS	DESCRIPTION			QTY	PRICE	TOTAL
CA-UI-7 T	07/01/94	# P	0007 5006037 20B	AS MACORT INHALER		20GM	₩	20 4	34.20 £	
CA-UI-2	07/01/94	*	OSTEDSTEND B	SANTAC TAB	300MG	30		30	72.97	
CB-UI-3	07/01/94	2	00597008214 00B	ATROVENT INKL ARRO COMPL	RO COMPL	14GH			23.18	
CA-UI-2	07/01/94	2	æ	ALUPRIT RDA CORP	15 MG / ML	10EL		10	-	
CA-UI-7	07/01/94	2	0008102497500B	LANOXIN TAB 0.25EG	EG.	1000		1000	71.41	
CA-UI-7	07/01/94	2	00085092401 g B	LOTRISONE CRE		1 5G K		S	13.84	
CA-UI-2	07/01/94	P	00068072361 B	SELDANT TAB 60 NG		100		100	34.96	
CA-UZ-7	07/01/94	2	00085092402 B	DEPOT LOTRISONE CRE	CRE	東55学		 	29.03	
CA-UI-7	07/01/94	2	00046086791 B	PREMARIN TAB 0.625EG	25EG	1000	lier - drops 34	1000	290,15	
CA-UI-2	07/01/94	*	50458022130 g B	HISORAL CREAK 28	JAME	3061		30	18.59	
CA-UI-2	16/10/10	2	00071027024 & B	HARDIL TAB 15EG		100	ander i Hiller	10	31.48	
C.R UI 2	07/01/94	2	€ ¥c0c0c068000	EINITRAN SYS 0.4 MG/KR	MG/XR	33		e E	34.61	
C-IU-40	07/01/94	(((((((((((((((((((00108359030-EB	DYALIDE CAP 25/37.5EG	. SEG	1000		1000	298,29	
CP-AI-3	07/01/94		00536392010003	NYOSOPHEN TB 16.2NG RUG	MG RUG	1000	سودرا وه	1000	7.80	
CA-UI-2	07/01/94	Paris I	00071221420 ! B	DILABITAR-125 SUSP	ρı	808		 CO	23.21	
CY-DI-1	07/01/94	900 . 30	00046087201 B	PREMARIN VAG CR	CR RBF .625 1	1.50%		1.5	25,14	
CA-UI-7	07/01/94	eletti E	23317070078 G	TRIPLE SUL VAS CRE NEC		2.750		2.75	2.80	
CA-UI-7	07/01/94	2	00062178115 \$ B	ORTHO MOVUE 1/1/1 DIALPAR 6X28	7 DIALPAK	6X28		168 /	113.22	
CA-UI-7	01/01/04	3 2	39506001125 B	BLDBPRYL TAB SEG	ROS	9	r •••	\$0 th	111.19	
CA-UI-7	07/01/94	2 2 2 44/44	00029321120 B	PAXIL TAB 2016		100		100	156.15	
CA-UI-7	07/01/94	Ancient Carlos	00088171247 B	CARAPATE TAB 1GE		100	•••	100	57.55	
CA-UI-7	01/01/04	2	00088179742 B	CARDISBE CD CAP 240EG	240MG	08	- T-	06	131.27	
CA-UI-2	07/01/94	2	00056017670 · B	COUKADIN TAB 2.5MG	NG.	100	Mr.Aric S	100	46.35	
CA-UI-7	07/01/94	>	58687002730 B	TECRETOL TAB 200MG	25	100	Jr. Berr	100	29.74	
CA-UI-7	07/01/94	2	00074629060 B	PCB DISPERTAB 333MG	3111.0	90	10. 10.	9	53.58	
CP-DI-3	07/01/94	*	00003048250 B	CAPOTEM TAB SORG		100		100	97.18	
CA-81-4	95/10/10	*	08250228466¥B	SYR INS SCC 29X. 5.	.5 BD328466C	66 C		100	18.44	
C-En-43	07/01/04	•	08290328411 +B	SYR IMS BD 29-100	328411	180	i Northern	190	18.44	
CA-UI-7	07/10/10	# (08290328456-608	811 - 138 - 506 - 29 X. 5 -	9940864B	9-9-9	The state of the s	100	18.44	
C.BBE-4	CA-UI-7- 4-07-101-194-1	X * X	** * ** *** *** ***	## - E#6 - BB - 29 - 100	C 328411-	> 901	>	180	i i	2685.16 1
File: CAL.WQ1	.									(12:00)
1 Trave	Travel to portula	3								2611.40
Thurs	(to morne	<u> </u>	, me							1 34.30)
James /	ud ente	Lateria	let som	22						
the o	end to me	me Keen	7 %							2577.10
3	Ĭ	,								•
- Kess	3	1115 111,000				٠				

Case 1:01-cv-12257-PBS Document 6399-16 Filed 08/21/09 Page 29 of 41

· • • • • • • • • • • • • • • • • • • •				
	240NE+47141 777-4040	had to	ACCT MGR: BILLING DATE	111 - 015 E: 7/01/94 R
#393 5 #147 92803	PHGNE: (714) 772-6060 DEA: PF0000012	SATCH: 007	- (PSZZÓLSŹZ VUZCVUZ
ī S	DEA: AK9632957	P.O. NUMBER	020917 21015	59 601 126
77556 77556	$H = 0.4 \times 10^{-3}$	000007019400 7/01/94	-6 CUSTOMER TON	ROUTE STOP
wife of		.,		"HAZARDOUS MATERIALS
				CODE CLASSIFICATIONS LISTED ON REVERSE SIDE
OTY ORD UN	ITEM DESCRIPTION	STORE	UNIT GP I PRICE % D	CODE EXTENS
**	TN OBSERVANCE OF	****		
*	INDEPENDENCE DAY YOUR MCKESSON DISTRIBUTION C	TR 🌣	400	
	WILL BE CLOSED MONDAY JLY 4TH. ORDERS TRANSMI SUNDAY JULY 3RD HILL BE	TTEO*		
*	DELIVERED TUESDAY JULY LF YOU HAVE ANY QUESTIO	5TH * = INS *	0 p	
* :	PLEASÉ CONTACT DUR CÚST SERVICE DPT AT 800-422- FROM ALL DF US AT HCKES	4131*	440	
*	HAVE A SAFE AND ENJOYA	BLE *		
**	**************************************	***	F	
O S EA ER	THR ETH D/S 200MG G/L	160Z G21.40	10.29 51.9	1 R 20.58
OSEALER	PAGE 2	1000 209.00	99.65 63.0	1KR00
POT LA OR	NOVUM 7/7/7 REFILL	100 3 13.18	228.09 14.2 3186 63.1	1 R 228.09 1 R 4.86
CSD ZEAMEN	JN-K TAB 600MG	1000B 161.32 500D 6 78.05	1380%1 14.2 3.83*95.1	1 R 138.41 1 R 7.66
OFEN DE	DROXYPR TAB 10MG URL SIPRAM TAB 10MG GEN NOT SHIPPED BY MANUFAC	1000 6 24.00 TURER	7.08*70.5 8.91 57.5	1 R 7.08
I B Z EA BE	ARAMINE TAB 2MG TAMET VAL CRH .1% G/L	100B 35.21 45GM G 7.50	-30.22 14.2 3.39 54.8	1 R 30.22 1 R 5.78
A LEA GLY	PAGE 3 G/L	100 627.77	13203 35.1 51.57*37.4	1 R 18.03 1KR 51.57
EA ATE	EURHT SKILAD ZOUNG KUG	500 Q 81.75	51.57*37.4 39.80*51.3 19289*37.5	1KR 39.80
O.Y.	PAGE 4	5000 831.80	174:0743 (4.5	1 R 19.89
EA PRO	PAGE NENTILI INHALER ⁴ NEACTAB 150HG	176MB 22.06 100B 159.44	18:93 14.2 134.86*15.4	1 R 113.58 1KR 404.58
7.1 US	Tyrn (agrama y y communication MCKESSON atrage of the state of the communication will be	DRUG CU.	**************************************	CONTINUED
	ente Como Esta de Sabilita en E <mark>va</mark> ntes.			
	THE DEFINITION OF THAPPA GRIATEST			
		Invoice	ACCT MCD-	112 015
#3936 #147	PHONE: (714) 772-6060 DEA: PF0000012	HIVORD	ACCT MGR: BILLING DATE	: 7/01/94 R 952201522
92803		8ATCH: 007	DEM: M C	VUZCVUZ
TE WAY 92277	DEA: AK9632957	P.D. NUMBER 000007019400	020917 21015	9 601 126 BOUTE STOP
92216	Branch Branch	7/01/94" (AUGHAN)	001110182	PAGE 2
			146	*HAZARDOUS MATERIALS CODE CLASSIFICATIONS

CODE CLASSIFICATIONS LISTED ON REVERSE SIDE

SATCH : 007 -

шест от 7/01/94 Мейство.

P.3. NUMBER 000007019400

STURE

92803

92277

DEA: AK9632957

ORD UN ITEM DESCRIPTION

*HAZARDOUS MATERIALS CODE CLASSIFICATIONS LISTED ON REVERSE SIDE Õ CODE EXTENS™ HHD019-0397

020917 210159 601 126

CUSTOMER | CN | OJ1110182

CA-	UI-7	"W"	ND	C # 5	42h	·
	1994	Red brok				-
	00182-	1371-40	t#189	24	00085-0924-0	2 t #257
②		1781-22	#305	(25)	00046-0867-9	1 4334
3	57267-	0146-30	#376	26	50458-0221-3	0 # 296
Ÿ		0165-40	#362	(2)	00071-0270-2	4 # 288
<u>(3)</u>	00228-	2269-50	#274	18	00089-0303-0	3 #277
6	00677-0	803-01	# 264	29	00108-3590-3	0 #182
Ō	00085-	0820-03	#324	(30)	00536-3920-1	0 #230
(<u>{</u>	00182-	1610-60	# 118	(37)	-00071-2214-2	0 4170
9			#206	(3)	00046-0872-0	#334
্ত্	00536-	3332-01	#109	(33)	23317-0700-78	#400
Ŏ	00536-4	1651-05	#381	(34)	00062-1781-15	# 305
$\widetilde{\Omega}$	00364- 0	:	#334	(33)	39506-0011-25	# 184
93	00085-0		#348	(3)	00029-3211-20	#311
(TV)	00173- 63	44-09	#415		00088-1712-47	#127
(E)	00048-11	30-03	#374		00088-1797-4	2 #129
(Ib)	00085-00	614-03	#348	39	00056-0176-7	0 #152
(D)	00075-00	60-37	+11) "	40	58887-0027-3	0 #375
18		* • •	#415	47)	00074-6290-60	#311
(19)	00597-00	82-14	# 110	(¥2)	00003-0482-50	# 126
(20)			#93	(4)	08290-3784-66	#114
(2)	00081-024	9-75	# 250		08290-3284-1	# 114
(22)	00085-092		#257	(FS)	08290-3284-66	# 114
23	00068-072	3-61 Y=	#360	(46)	08290-3284-1	1 4 #114





	IF PAYING BY INVOICE, PLEASE REMIT TO MERCK HUMAN HEALTH DIVISION	TERMS:	<u>, , , , , , , , , , , , , , , , , , , </u>		MAILING	ADDRESS 0000	·i
1	कार कर कार्यात । संक्रमेंब्रीय सिवित कर रागे भी देखा रूप्ट		1777 - 1747 - 1	;	Sp. Politica - Africa A	EBST OTREET	
1	र्माणा करम्बाद्वाणाः १४ २५६ र ४,४		$(-1)^{\frac{1}{2}} \left(\frac{1}{2} \left(\frac{1}{2} - \frac{1}{2} \right) \right)$.∓ Kt., t.i	13、中国共享企业	0A 90040)
8 0 L	PERDINENCE OFFICE POLICE.	· [SPECIAL IN	STRUCTIONS:	PAGE	UNHSE. DIST. CODE	
р Т	TWENTY MINT THE REFERENCE	177				JO 000 PICK NBR.	- J-
	•	3.3				우리를 PICK DATE	
SHIP				***		07-01-94	
P T		_	TI, ISTRA	1 + 4 W (A)	TIME LOSI	0.7-01-94	•
, 0	CUST, NARCOTIC N	O. CUSTOM	ER ORDER NUME		NUMBER INV. NO.		
	- AKT G 207 C	173		100	53165 0382	07-01-94	·
NDC :	SHIPPED VIA: UES		TERI	R S: (1999)	0885 8885	9883	
M59	DESCRIPTION		PRODUCT SIZE	QTY.	UNIT PRICE	EXTENSION	5 1 196
0000	WILMOPTIC SECT OCUMENTS		3 336710	3.	20.30	79.08	
336 1	24 TIMOPTIC - SPOT OCUMETE		B 336712	3.	37,44	118.32	
0742-3	PRILOSEC 20MG CAPSU	-	344031	-3	GD. 90	300,92	
0464-	OPERCID 40HG TABLETS	1,0000	The state of the s		229.50	229.50	ا ي د
0730-1	MEVACOR 10HG TABLETS		356061		58.95	56.75	
07276	IOMEVACOR ZONG TABLETS	maketin die same is dieseles same er beite 19	356161	6	95.83	574.98	
	AND THE RESERVE OF THE PROPERTY OF THE PROPERT	<u>69</u>	3 756261	2	172.49	344.98	Million San I
					an edgyn yn grest		·
į		3 - 32 -	A William Service	- E			•
ļu r					The fact that the second of the fact that the second of th		
i.							de la
1		enging en.			医脱氢氧化钾 化铁矿		8
		1 70		ing Pa	N Alexand		
FA 2 WE I MEA INTO	IG (REV. 9485) HEREBY GUARANTEE THAT THE ARTICLES LISTED HEREBY ARE NOT ADJANNO OF THE FODERAL FOOD, DRUG AND COSMETIC ACT AND ARE NOT AN INTERSTATE COMMERCE UNDER THE PROVISIONS OF SECTION 404 OR N PRODUCED IN COMPLIANCE WITH THE REQUIREMENTS OF THE FAIR ETO MERCHANDISE PASSES TO BUYER AT POINT OF SHIPMENT.	ALTERATED OR MISBRAN RTICLES WHICH MAY NOT 1 505 OF SAID ACT, AND T	DED WITHIN THE BE INTRODUCED HAT THEY YAVE	от. wgт. 1704	¹ тот. ату. ∷о	1,761,73	•

Case 1:01-cv-12257-PBS Document 6399-16 Filed 08/21/09 Page 34 of 41



07/31/94

CUSTOMER NO. 1053165

CODE:

1 OF 1

20 INVOICE

21 RETURNED GOODS CREDIT

22 ALLOWANCE

96 CASH REMITTANCE UNAPPLIED

97 UNEARNED DISCOUNT

98 OVER/UNDER PAYMENT TO ADJUST

KENNEYS DRUG STORE 73501 29 PALMS HWY TWENTY NINE PALH CA 92277

REHIT TO: MERCK & CO., INC HUMAN HEALTH DIVISION

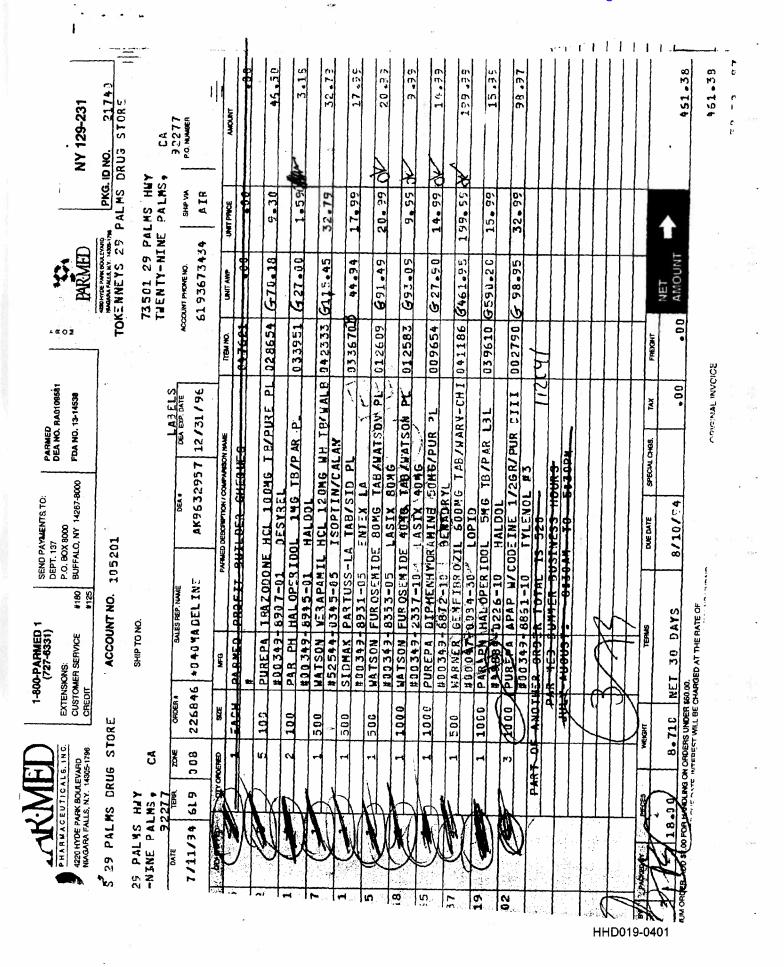
FILE 53711 LOS ANGELES, CA 90074-3711

1-800-MERCKRX

TERMS

2% 15TH PROXIMO NEOM

20 20 20 20 20 20	07/01/94 07/18/94 07/18/94	382 384 385 383 386		1,761.73 1,046.75 356.37	40 26	10/18/94 10/20/94	183.66 177.63
				-			
,	15.1			ē.	4 59		
	; 30 DAYS 3,164.85		31-62 DAYS .00	ACCOUNT STATUS	61-90 DAYS	00	11-120+ DAYS
-UDING	DATE LAST PAYMENT DISCOUNT ENT RECEIVED	××	08/15/94 6,010.09CR			TTOTAL	.00 3,164.85 361.29 3,526.14
FA WE MM MM BEI	28 (REV. 0:95) E HEREBY GUARANTEE ANING OF THE FEDERAL O INTERSTATE COMME!			ATED OR MISBRANDED WITHIN THE SWINCH MAY NOT BE INTRODUCED F SAD ACT. AND THAT THEY HAVE R STANDAFIDS ACT, AS AMENDED.	101. WGT. 101	. QTY.	
• 111	LE TO MERCHANDISE P	ASSES TO BUYER AT	EQUITEMENTS OF THE FAIR LABOR POINT OF SHIPMENT.	A STANDARDS ACT, AS AMENDED.	1/03	12	1,046.75





STATEMENT

SEND REMITTANCE TO: DEPARTMENT 137 P.O. BOX 8000 Buffalo, N.Y. 14267-8000

KENNEYS 25 PALMS DRUG STORE

73501 25 PALPS HWY TWENTY-NINE PALPS, CA 52277

STATEMENT DATE	CUST. ACCT. NO.	SALESPERSON
8/01/54	105201	MACELINE C.

NUMBER	INVOICE DATE	DUE DATE	CODE	ORIGINAL INVOICE	CREDITS	REMAINING BALANCE
954470 067894 016786 021551 021740 021741 955999	4/13/94 5/24/94 6/22/94 7/08/94 7/11/94 7/11/94 7/29/94	5/13/54 7/23/54 7/22/54 8/07/54 8/10/54 8/10/54 7/29/54	IN IN IN IN IN	49.59 495.54 513.17 522.57 461.38 58.59 2.83	5.00-	7-12-99, 459.54 049,547, £13.17 £22.57 461.38 £8.£9 2.£3
	Court	10 10	90 7	7 d 3	11,94 pg106.	
***		**				
CURRENT 2058.	OVER 30 I		60 DAY:	PLEASE CALL: 1	IRIES 800-727-6331 CECHARGER	TOTAL DUE 2:103.47 REFLECTS PAYMENTS POSTED

CODES: IN - INVOICE

DM - DEBIT MEMO

CH - CREDIT MEMO

IF ACCOUNT REMAINS UNPAID AFTER DUE DATE, INTERES WILL BE CHARGED AT THE RATE OF 2% FOR EACH MONTI OR FRACTION THEREOF (24% ANNUAL RATE) THAT THE BAL

Confidential Pharmacy Information Form

Pharmacy Name:	Kenneys Draig Strone		
	-		
Address:	73501 29 Palms Hwy		
	29 Palms,cA Twenty nine Palms, california 92277		
	429	<u>,</u>	
Phone Number:	¢1(#08 #\$#\$ 610-367-3434 For	619-367-1648	
Contact Person:	Carol Barrett		
	Type of Pharmacy		
	(Check Appropriate Block(s))		
Inder	pendent Retail Pharmacy	Ŗ	
•	(four or more stores) Pharmacy	â	
	Nursing Home Pharmacy		
•	Hospital Outpatient Pharmacy		
	Home I.V. Pharmacy		
	Mail Order Pharmacy		
	County Public Health Unit Pharmacy		
	Public Health Entity		

ACCOUNT NUMBER PURCHASE ORDER SHIP TO: ... DRUG ZY PALMS HWY PALMS 92277 CUSTOMER DEA UPJOHN DEA AK9632957 39-02-205 UPJOHN TAX # 38-1123360 PT0021713 NOC 0009 PRODUCT DESCRIPTION UOU HALCION TABS 0. 125MG C-IV 5. 17 40.92 122.76 286-03 PROVERA TABS 5MG 64-04 PROVERA TABS 2. 5MG ., 27, 12 81.36 MICRONASE TABS 5. OMG 171-06 203. 69 203.69 MICRONASE TABS 2.5MG 54.88 141-01 27.44 PROVERA TABS 10MG 152.10 50-02 50.70 Order was taken by L.M. Dotter Order Phone Number 1-800-821-7000 REMIT TO: THE UPJOHN COMPANY TERMS INV. DATE

EXPLANATION OF CLAIM POLICY

9/15/94

9/25/94

SX UNTIL

B . SPECIAL QUOTATION

E - PARTIAL BOTTLE

HET

62244

CA 90088

A = CONTRACT PRICE

D = UPJOHN USE ONLY

ANGELES

NSACTION CODES:

ERPORTING SHORTAGE, EXAMINE PACKING CAREFULLY, NO CLAIM FOR SHORTAGE OR DAMAGE WILL BE ALLOWED UNLESS MADE TEN (10) DAYS FROM RECEIPT OF GOODS. RETAIN DAMAGED MERCHANDISE AND PACKAGE FOR INSPECTION. IMMEDIATELY REPORT ANY AGE OR DAMAGE TO YOUR REGIONAL DISTRIBUTION CENTER.

NTEMENT CONTAINED ON ANY PURCHASE ORDER OR SIMIL/AP DOCUMENT WHICH IS NOT SPECIFICALLY APPROVED OR ACKNOWLEDGED NG BY THE UPJOHN COMPANY WILL NOT BE CONSIDERED AS PART OF THE AGREEMENT BETWEEN THE PARTIES.

HHD019-0404

666, 49

INVOICE

TOTAL

7/28/94

C = CONTROLLED SUBSTANCE

F = OWN USE PRICE

Case 1:01-cv-12257-PBS Document 6399-16 Filed 08/21/09 Page 39 of 41

YOUR ACCOUNT NUMBER STATEMENT DATE OPEN ITEM STATEMENT Charges are removed from this Statement when that Payments test are applied to a specific charge are not shown on the statement. 39-02794 Upjohn 08-26-94 PAGE FUTURE DATED NOT DUE CHANGES DATED AS OF PURCHASE ORDER NO. CURRENT AMOUNT PAST DUE AMOUNT TRANSACTIONS NUMBER TYPE DATE 309.29 06-01-94 1,131.03 FD 06-21-94 78.93 FD 06-30-94 966 666.49 11-25-94 ENV 07-28-94 067 FD 068 07-28-94 401.48 12-25-94 THY 08-11-94 **þ69** FD 08-11-94 a vad. 253547.

DUE AFTER 15TH

LPP - LATE PAYMENT PENALTY

PRESTOCK
NO CASH DISCOUNT ON THIS INVOICE

2,587.22

AMOUNT NOT YET DUE

· INVOICE · CREDIT MEMO · FUTURE DATED

TAX ADJUSTMENT

FD

462.57

STATEMENT QUESTIONS: CALL 1-800-290-7362

51.75

EXPLANATIONS OF TRANSACTION TYPE

JE - ADJUSTMENT
DISCOUNT NOT ALLOWED
UNAUTHORIZED DEDUCTION
TRANSACTION TRANSPERRED

LESS DISCOUNT

VR - CHECK ISSUED
CREDIT BALANCE OR
DUPLICATE PAYMENT REFUNDED
NSF OR STOP PAYMENT CHECK

NET DUE BEFORE 15TH

AMOUNT

440.59

21.98

jan (j. 1865.)				
REMIT TO: THE UPJOHN COMPANY	TERMS	INV. DATE		
DEPT # 62244 LOS ANGELES CA 90088	2% UNTIL 9/15/94 HET 9/25/94	9/11/94	INVOICE	401. 48
TRANSACTION CODES: A = CONTRACT PRICE D = UPJOHN USE ONLY	그는 그 가는 사람들이 되었다. 그 사람들이 살아 있는 것이 없는 것이 없다.	NTROLLED SUBSTANCE IN USE PRICE		

EXPLANATION OF CLAIM POLICY

BEFORE REPORTING SHORTAGE, EXAMINE PACKING CAREFULLY. NO CLAIM FOR SHORTAGE OR DAMAGE WILL BE ALLOWED UNLESS MADE WITHIN TEN (10) DAYS FROM RECEIPT OF GOODS. RETAIN DAMAGED MERCHANDISE AND PACKAGE FOR INSPECTION. IMMEDIATELY REPORT ANY SHORTAGE OR DAMAGE TO YOUR REGIONAL DISTRIBUTION CENTER.

ANY STATEMENT CONTAINED ON ANY PURCHASE ORDER OR SIMILAR DOCUMENT WHICH IS NOT SPECIFICALLY APPROVED OR ACKNOWLEDGED IN WRITING BY THE UPJOHN COMPANY WILL NOT BE CONSIDERED AS PART OF THE AGREEMENT BETWEEN THE PARTIES.

V ORDER:	ERVICES:		DATE	7708794			(34355	AMOUNT	17.5	25.13	68.24	55,13	98.70	} •					A pay last amount this column	-
ORIGINALIMAVOICE TO PLACE AN ORDER:	16003274414 ALL OTHER SERVICES:	18004452455	ER INVOICE NUMBER	80008532	DRUG STORE GHWAY CA 92277	ORDER NUMBER	0079234620000	E UNIT PRICE 0	SC+7.84 R	- OK25.19 R	JE68.25 R	OK55.13 R	<u>,</u>	5 . 6	7,77				** PRICE CODES R - REGULAR C - CONTRACT H - HAND PRICE S - SHORT DATED P - PROMOTION	reby agrees to all of the above
	INE LABS (CM) AN BRANCH GENERAL STREET	SEVENIH D CUCAMON	CUSTOMER NUMBER	PO.* x	RENNEYS 29 PALMS HI TAENTYNINE PALMS HI	TC S SHIPVIA	21 01 JPS GROUND 000:	DESCRIPTION STRENGTH SIZE	LA TAB 75 MG	00182173041VFRUNETH H/DN CGH SYR 15MG/M GAL	PROXEN SOOMS TABS 500 MS D	PROXEROSTSHG TABS 375 NS D		w did	Mar June	Jeona .	March		bect to a LATE PAYMENT CHARGE of 1-169b per month or 18% per annum (or the tast) on all amounts due over thirty (30) days. The oxder for the goods sel forth the dot to have been accepted at the home office of the selber in Broward County, Florida. Costs of collection including Court Costs and reasonable attorney's fees. Costs of collection including Court Costs and reasonable attorney's fees. Costs of collection including Court Costs and reasonable attorney's fees. Costs of collection including Court Costs and reasonable attorney's fees. Costs of collection including Court Costs and reasonable attorney's fees. Costs of collection including Court Costs and reasonable attorney's fees.	thank Customer, by acceptance of merchandise, hereby agrees to all of the above you! Terms and Conditions
	•	ILLINDIS 60693 11380 RANCHO	WHSE LOCATION	CPP RPP	ACCOUNTS PAYABLE S 29 PALMS DRUG STORE 31	CED NI IMBER GROTYPE ISR TSR TERMS	R FP01	S C NDC/UPC NUMBER	SHIPPED 8/0 * 001821722605 PHEWLFENESIN	1 - 00182173041VFR	71/ 00182192305 MAPRUXEN	00182192205 MAPROXENOSTONG							The above order is submaximum permitted by mon this invoice is deem?ver agrees to pay all hardes must farms will be	1900 to 1900 t
Goldline Laboratories			EOBM 222 #		SOLD TO: ATTN: ACCOURTENING SP COBB6031	N CGS GSBWIN VSG	<u> </u>	11 5	ORDERED 1.	8PP (2) 1	RPP B-102-A	RPP 122-E	КРР	41.11					0/10/9 7/11/9 7/20/9	
4														es.				// // HH	D019-0406	•

Colone C	ORIGINAL INVOICE TO PLACE AN ORDER	18.00.3.2.7.4.1.1.4 ALL OTHER SERVICES:	2	80008532 7/08/94	ARUG STORE GHWAY CA 92277	ORDER NUMBER 00000222 (925/200 1.54 558	UNIT PRICE D AMOUNT	1641.45 R 31.48				** PRICE CODES R - REGULAR C - CONTRACT H - HAND PRICE S - SHORT DATE P - PROMOTION	ogrees to all of the above
1 1 22 11 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1	SYY. BULDLINE LABS (CA)	HESTERN BRANCH 11380 SEVENTH STREET RANCHS CUCANONSA CA	ISE LOCATION	RPP P.O. # . X	COUNTS PAYABLE SHIPTO: X3501, 29 PALMS AT PALMS HI THENTYHINE PALMS HIS	GPO NUMBER GPO TYPE ISR TSR TERMS TC SHIP VIA 12070 R FP01 FP01 HET 30 31 01 JPS SRESUM3	ORDERED SHIPPED 8/0 * NDC/UPC NUMBER LOT	# 1 1 # 00162093810 APAP/COD 30MB TABS C 300/30	010460-1			The above order is subject to a LATE PAYMENT CHARGE of 1-1/4% per month or 18% per annum (or the maximum permitted by law if less) on all amounts due over thirty (30) days. The order for the goods set forth and this involce is deemed to have been accepted at the home office of the seller in Broward County, Florida. Buyer agrees to pay all costs of collection including Court Costs and reasonable attorney's fees. All discrepancies must be reported within 72 hours. No returns will be accepted without prior authorization.	BASKETS CARTONS YOU!